PLEASE NOTE: YOU MUST COMPLETE THE FOLLOWING:

Page 1 of 2

BIRCH, STEWART, KOLASCH & BIRCH, LLP

P.O. Box 747 • Falls Church, Virginia 22040-0747 Telephone: (703) 205-8000 • Facsimile: (703) 205-8050 ATTORNEY DOCKET NO. 2927-156P

COMBINED DECLARATION AND POWER OF ATTORNEY FOR PATENT AND DESIGN APPLICATIONS

As a below named inventor, I hereby declare that: my residence, post office address and citizenship are as stated next to my name; that I

	verily believe that I am the original, first and sole inventor (if only one inventor is named below) or an original, first and joint inventor (if plural inventors are named below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:									
	Ink Tube for Ink Jet Printer									
Insert Title:)									
	the specification of which is attached here			.						
Fill in Appropriate Information - For Use	the specification was filed on		ber 27, 200	· · · · · · · · · · · · · · · · · · ·	as	i				
			10/692,789 ;							
Without Specification	and amended on the specification was filed on		(if applicable); and/or							
Attached:	<u> </u>		as PCT							
	amended on									
	anended on		(if applicable)							
	I hereby state that I have reviewed at by any amendment referred to above. I acknowledge the duty to disclose i §1.56. I do not know and do not believe to thereof, or patented or described in any prior to this application, that the same we application, that the invention has not be application in any country foreign to the more than twelve months (six months for on this invention has been filed in any representatives or assigns, except as follows.	nformation which he same was ever printed publication as not in public us been patented or United States of or designs) prior to country foreign to	is material to patentable known or used in the on in any country before or on sale in the Un made the subject of a America on an applicato this application, and	United States of Am ore my or our inventi- ited States of America in inventor's certifica tion filed by me or mand that no application f	e 37, Code of Federal Interica before my or out on thereof or more that a more than one year just e issued before the cay legal representative for patent or inventor!	Regulations, ar invention an one year prior to this date of this s or assigns s certificate				
٠.	I hereby claim foreign priority ben or inventor's certificate listed below and a filing date before that of the application	have also identif	ied below any foreign	e, §119 (a)-(d) of any application for pater	foreign application(s nt or inventor's certifi) for patent cate having				
Insert Priority Information: (if appropriate)	Prior Foreign Application(s)				Priority	Claimed				
	2002-312162	Japan		10/28/02	Thomy					
	(Number)	(Country)	(M	Ionth / Day / Year Filed)	Yes	No				
	(Number)	(Country)	(M	Ionth / Day / Year Filed)	Yes	No				
	(Number)	(Country)	(M	lonth / Day / Year Filed)	\ Yes	□ No				
		, , , , , , , , , , , , , , , , , , , ,	`	,						
	(Number)	(Country)	(M	lonth / Day / Year Filed)	Yes	No				
Insert Provisional Application(s): (if any)	I hereby claim the benefit under Title 35, United States Code, §119(e) of any United States provisional application(s) listed below.									
	(Application Number)		(Filing Date)							
	(Application Number)				(Filing Data)					
	(Application Number) (Filing Date) All Foreign Applications, if any, for any Patent or Inventor's Certificate Filed more than 12 months (6 months for designs) Prior to the Filing Date of this Application:									
Insert Requested Information: (if appropriate)	Country		Application Number		Date of Filing (Month / Day / Year)					
Insert Prior U.S. Application(s):	I hereby claim the benefit under Title 35 insofar as the subject matter of each of the in the manner provided by the first para which is material to patentability as defiling date of the prior application and the (Application Number)	ne claims of this a graph of Title 35, fined in Title 37, he national or PC	pplication is not discle United States Code, Code of Federal Regi	osed in the prior Unit §112, I acknowledge ulations, §1.56 whic date of this application	ed States and/or PCT the duty to disclose it h became available b	application nformation etween the				
Du 1 -60	(Application Number)	(i	iling Date)	(Status - pa	itented, pending, abandone	ed)				

I hereby appoint the practitioners at CUSTOMER NO. 2292 as my attorneys or agents to prosecute this application and/or an international application based on this application and to transact all business in the Patent and Trademark Office connected therewith and in connection with the resulting patent based on instructions received from the entity who first sent the application papers to the practitioners, unless the inventor(s) or assignee provides said practitioners with a written notice to the contrary:

Send Correspondence to:

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BIRCH, STEWART, KOLASCH & BIRCH, LLP or **CUSTOMER NO. 2292** P.O. Box 747 • Falls Church, Virginia 22040-0747

Telephone: (703) 205-8000 • Facsimile: (703) 205-8050

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

FOLLOWING:							
Full Name of First or Sole Inventor: Insert Name of Inventor Insert Date This Document is Signed	GIVEN NAME Hideyuki		INVENTOR'S SIGNATURE	Burama	DATE*		
Insert Residence Insert Citizenship	Residence (City, State & Country) Hyogo, Japan Japan						
Insert Mailing Address	MAILING ADDRESS (Complete Street Address including City, State & Country) 6-9, Wakinohama-cho 3-chome, Chuo-ku, Kobe-shi, Hyogo, Japa						
Full Name of Second Inventor, if any:	GIVEN NAME	FAMILY NAME	INVENTOR'S SIGNATURE		DATE*		
see above	Residence (City, State & Country)			CITIZENSHIP			
	MAILING ADDRESS	(Complete Street Address in	<u> </u>	• ·			
Full Name of Third Inventor, if any	GIVEN NAME	FAMILY NAME	INVENTOR'S SIGNATURE		DATE*		
see above	Residence (City, State & Country)			CITIZENSHIP			
	MAILING ADDRESS	(Complete Street Address in	cluding City, State & Country)				
Full Name of Fourth Inventor, if any	GIVEN NAME	FAMILY NAME	INVENTOR'S SIGNATURE		DATE*		
see above	Residence (City, Stat	e & Country)		CITIZENSHIP			
	MAILING ADDRESS (Complete Street Address including City, State & Country)						
Full Name of Fifth Inventor, if any	GIVEN NAME	FAMILY NAME	INVENTOR'S SIGNATURE		DATE		
see above	Residence (City, State & Country) CITIZENSHIP						
Page 2 of 2	MAILING ADDRESS	(Complete Street Address ind	cluding City, State & Country)				
(Revised 01/02)	* DATE OF SIGNATUR	C			•		